Written Testimony of Stephen R. Smith, M.D., M.P.H. presented to the Public Health Committee on Senate bill 1049, a bill prohibiting certain pharmaceutical and medical device company gifts to health care providers

Senator Harris, Representative Ritter and members of the committee, I testify before you today on behalf of myself and many physicians here in Connecticut and across the country who believe that gifts to physicians from pharmaceutical and medical device companies exacerbate the problems of escalating health care costs and threaten patient safety and should be banned. I speak from my perspective as a practicing family physician at the Community Health Center of New London and as a member of the board of directors of the National Physicians Alliance.

Let us be clear about one thing: the reason that drug companies give gifts to doctors is to get them to write more prescriptions for their products. In other words, the main motivation is profit. These gifts may be wrapped in a façade of rationalizations—that they will provide valuable and important information to the doctor on new drugs, that they will benefit patients, that they will make the job of the doctor's staff easier—but the true reason is to increase sales for the drug company. This is accomplished by creating a feeling of obligation on the part of the recipient of the gift. It is simply human nature for all of us to feel a desire to reciprocate for an act of kindness, such as receiving a gift. When we receive a gift and say "thank you, much obliged," we convey that sense of obligation with our words. This is exactly what the drug companies want doctors to feel.

The size of the gift doesn't matter. Even small gifts that might seem insignificant matter, like pens or pads of paper. According to Katz et al., "When a gift or gesture of any size is bestowed, it imposes on the recipient a sense of indebtedness. The obligation to directly reciprocate, whether or not the recipient is conscious of it, tends to influence behavior."

(1)

The practice of gift giving and receiving is ubiquitous, with 94 percent of physicians reporting some type of relationship with the pharmaceutical industry. Mostly, this involves receiving food in the workplace (83 percent). (2) Most doctors dismiss the idea that they are being influenced in their prescribing practices by accepting these "free lunches," but only 16 percent were confident that their colleagues were not influenced! (3) In fact, study after study has shown that doctors are influenced by such gifts. (4) Why else would the pharmaceutical industry spend \$7 billion a year to promote their drugs to doctors? (5) Doctors are unaware of the insidious, unconscious effect that the gift giving has had on them. Through a mechanism known as "self-serving bias," doctors rationalize their decision to write prescriptions for the drugs being pushed by the drug sales representative, even though that drug might cost much more and have no demonstrable therapeutic advantage over an older, time-tested generic alternative.

The cost of such unconscious decisions is huge. We are expected to spend \$245 billion on prescription drugs this year, representing nearly 10 cents out of every dollar spent on health care. (6) Whether this is reflected in higher premiums for private health insurance or higher taxes to pay for Medicare and Medicaid, it's costing all of us a lot of money. For example, recently, I saw a child with bad asthma at the Community Health Center in New London. I had to give the child a breathing treatment in the office. The mother said her sister had received a prescription from her doctor for Xopenex, which she was told was better than the standard generic treatment, albuterol. I explained to her that Xopenex was levalbuterol, which is the active ingredient in regular albuterol. The albuterol treatment I gave her son completely cleared his asthma. A month's supply of generic albuterol costs \$4; a month's supply of Xopenex costs \$393. (7) There is no convincing evidence that Xopenex is any better than generic albuterol.

Patient safety is also an issue. High-pressure tactics used by drug company sales persons can greatly increase the number of prescriptions written for new drugs that have not yet been subjected to extensive field trials to detect rare but serious side effects. Such was the case for Vioxx where aggressive marketing by Merck resulted in enormous sales right after its "launch." In the past, sales of new drugs rose gradually, allowing time for rare but sometimes lethal side effects to be detected. But in the case of Vioxx, sales took off like a rocket after its "launch." The result was many more deaths than necessary from a pain reliever no more effective than aspirin.

Senate bill 1049 recognizes that there is no such thing as a free lunch. We're all paying for it through higher premiums and higher taxes. Believe me, doctors can afford to buy their own lunches. Patients need to know that their doctors are writing prescriptions based on the best scientific evidence and in the patient's best interests, and not because of pressure from drug companies.

I urge you to support the ban on inappropriate gifts from pharmaceutical and medical device companies to health care providers.

References

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